

01-15-03

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

Application Number

09/928,130

Filing Date

August 10, 2001

First Named Inventor

D. Sullivan

Group Art Unit

unassigned

Examiner Name

unassigned

Attorney Docket Number

12917US03

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form☒ Fee Attached☐ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure
Statement☐ Certified Copy of Priority
Document(s)☐ Response to Missing Parts/
Incomplete Application☐ Response to Missing Parts
under 37 CFR 1.52 or 1.53☐ Assignment Papers
(for an Application)☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a
Provisional Application☐ Power of Attorney, Revocation
Change of Correspondence
Address☐ Terminal Disclaimer☐ Request for Refund☐ CD Number of CD(s) _____☐ After Allowance Communication
to Group☐ Appeal Communication to Board
of Appeals and Interferences☐ Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please
identify below):Request for Reconsideration of
Supplemental Petition under 37
CFR 1.47(a) Declaration

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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm

or

Individual Name

McAndrews Held & Malloy, Ltd.

Signature

George Wheeler

Date

January 13, 2003

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EXPRESS MAIL LABEL #EL542918092US

Name (Print/type)

George Wheeler

Registration No. (Attorney/Agent)

28,766

Signature

George Wheeler

Date

January 13,
2003

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PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2003 Patent Fees are subject to annual revision.		Complete if Known	
		Application Number	09/928,130
		Filing Date	August 10, 2001
		First Named Inventor	D. Sullivan
		Examiner Name	unassigned
		Group Art Unit	unassigned
TOTAL AMOUNT OF PAYMENT	(\$) 725.00	Attorney Docket No.	12917US03

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																													
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 13-0017 Deposit Account Name: McAndrews, Held & Malloy <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																																																																																																																													
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																																																																																																															
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	George Wheeler	Registration No. (Attorney or Agent)	28,766
Telephone	312-775-8000	Date	January 13, 2003
Signature	<i>George Wheeler</i>		

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